



NASA Langley  
Child Development Center

8 Lindbergh Way  
Mail Stop 263  
Hampton, VA 23681  
(757) 864-4827

Dear Parents,

Welcome to the NASA Langley Child Development Center. We are happy to have you and your child/children in our program. Our primary goal is to provide high quality child care to all of our families. We understand and know the importance of providing an environment which is safe and secure, whereby; our parents are able to leave their children with confidence about the quality of care they will receive and the need for our children to feel safe, secure and loved by the adults taking care of them. To insure quality programming, we provide appropriate training for our staff, including First Aid and CPR courses, Child Abuse training, and a variety of other classes related to basic child care.

This handbook is provided to inform parents of the LCDC policies and procedures, which governs the program. Please read your handbook very carefully, in order to fully understand your responsibilities as parents to the LCDC program, your child's role as a student, and the responsibilities of the LCDC staff.

The LCDC provides the following services for employees of NASA Langley and NASA contractors:

- Infant/Toddler Care
- Preschool Care
- School-age Summer Camp
- Full-time Care
- Part-time (limited slots)
- Drop-in (based on availability)

Thank you for giving us the opportunity to serve you and your family. We look forward to working with you to provide the best possible program for your child/children. Parents are encouraged to visit and participate in our program as much as possible. We welcome your assistance in making this a great program.

Yours truly,

Director, LCDC

## **TABLE OF CONTENTS**

### **INTRODUCTION**-----Page 6

Purpose pg. 7  
Center Philosophy and Goals pg. 7  
Standards pg. 8  
Program Evaluation pg. 9  
Staff Requirements pg. 9  
Hours of Operation pg. 10  
Liability Insurance pg. 11

### **ADMISSION PROCEDURES**-----Page 11

Eligibility for Enrollment pg. 11  
Full Time Enrollment pg. 11  
Space Available Enrollment pg. 12  
Subleasing pg. 12  
Waiting List pg. 12  
Waiting List Procedures pg. 12  
Financial Commitments pg. 13  
Parent Orientation pg. 14  
Registration Information pg. 14  
Child's Health History pg. 14  
Foreign Travel pg. 15  
Withdrawal Procedures pg. 15

### **NASA LCDC CENTER PROCEDURES**-----Page 16

Arrival and Departure pg. 16  
Release of Children to Family and Friends pg. 16  
What to Bring from Home pg. 17  
Toys from Home pg. 18

### **FEES AND CHARGES**-----Page 19

Annual Registration pg. 19  
Sibling Discounts pg. 19  
Vacation or Sick Week Discount pg. 19  
Late Payment Fee pg. 19  
Late Pick-up Fee pg. 20  
Returned Check Fee pg. 20  
Diaper Charge pg. 20  
Current Fees and Charges pg. 20

### **EDUCATIONAL CURRICULUM**-----Page 21

Program Goals pg. 21  
Staff/Child Ratios pg. 22  
Supervision of Children pg. 22

Creative Curriculum pg. 23  
Classroom Routines pg. 23  
Developmental Screenings pg. 24  
Parent Conferences pg. 24  
Student Promotions pg. 25  
Field Trips pg. 25  
Parental Involvement pg. 25

NUTRITION PROGRAM-----Page 26

Meal Times pg. 26  
Parent Meals pg 26  
Celebration of Birthdays pg. 26  
Restricted Diets pg. 27

HEALTH POLICIES-----Page 27

Control of Contagious Illnesses pg. 27  
Re-admission Following Illness pg. 30  
Health and Safety Inspections pg. 31

ADMINISTRATION OF MEDICATION-----Page 31

Short Term Prescription Medication pg. 32  
Long Term Prescription Medication pg. 32  
Non-Prescription Medication pg. 32  
Storage of Medication pg. 33  
Documentation of Medication pg.33

INJURIES AND MEDICAL TREATMENT-----Page 33

Emergency Medical Treatment pg. 33  
Minor Health Problems pg. 34

CHILD AND ABUSE AND NEGLECT-----Page 35

CONFIDENTIALITY-----Page 35

Photographs and Recordings pg. 35  
Communication and Privacy pg. 35

CHILD GUIDANCE AND DISCIPLINE -----Page 36

Withdrawal for Problem Behaviors pg. 37  
Management of Biting Behaviors pg. 38

PARENTAL RESPONSIBILITIES-----Page 39

LCDC PARENT TEACHER ASSOCIATION-----Page 40

CONFLICT RESOLUTION-----Page 41

Termination of Services pg. 41

**STAFF ACKNOWLEDGMENT FORM**----- Page 42

**PARENTAL ACKNOWLEDGMENT FORM**----- Page 43

## **INTRODUCTION**

**The Child Development Center at National Aeronautics and Space Administration, Langley Research Center values inclusion and diversity and strives to include families from the NASA Civil Servants, contractors, and nearby military installation and federal agency personnel on a space available basis in the Hampton Peninsula area who represent a wide range of educational and economic backgrounds. We welcome all children, who can participate in, and benefit from, programming with a diverse and well-qualified staff. The Center fulfills a very exciting and important support family life and work mission at NASA Langley. It offers full time and part time, high quality childcare and education for young children, ages six weeks through pre-kindergarten with summer programming for children up to 12 years of age.**

**The Center reflects current standards of best practice as articulated by the National Association for the Education of Young Children (NAEYC), and uses them as well as Virginia licensing regulations and Department of the Defense to insure the health, safety, welfare, and age appropriate developmental and educational needs of each child and family. The NAEYC Code of Ethical Conduct guides all decisions regarding programming and relationships. Parents are recognized and valued as active members of the Center's team and are partners in guiding the care and educational needs of their children.**

**The Office of Human Capital Management, Morale Welfare and Recreation Office, Exchange Operations is the responsible organization delegated the authority by the Langley Center Director and NASA Headquarters to oversee and manage the day-to-day operations of the Center. The NASA Langley Exchange Council establishes policies, approves fees and operational budgets. The Deputy Director for Office of Human Capital Management serves as the chair of the Exchange Council. There are seven additional voting members appointed by the Director and approved by the Center Director. These members represent the various stakeholder organizational units at the center. The following are current voting members of the council: Damon Shaffer/Treasurer, Office of Chief Financial Officer; Jill Marlowe, Deputy Director, Engineering Directorate; Grant Watson, Director for Safety and Mission Assurance; Cheryl Allen, Center Operations Directorate, Lisa Harvey, Office of Procurement, Rodney Russell, Office of Safety and Mission Assurance. There are two nonvoting advisory officio members: James Carson, Office of Chief Financial Officer, Ken Geotzke, and Office of Chief Counsel.**

**The LCDC plays an important role in enhancing and sustaining the Langley Research Center work and family life. The LCDC welcomes all types of subject matter professionals on center with a variety expertise in fields such as Sciences, Technology, Education, Math, music, arts, physical education, psychology, speech and hearing, nursing, medicine, and social work to participate in the Center's activities.**

## PURPOSE

The purpose of the NASA-Langley Child Development Center (LCDC) is to provide high quality, developmental child care services for the families of NASA Langley Research Center (LaRC) civil service employees and support service contractors, allowing those men and women to work free of concern for the safety and welfare of their children. . It is sponsored by the NASA Langley Exchange as an employee benefit and is operated as a part of the Exchange that is a non-appropriated instrument of the United States Government. Eligible children are admitted without regard to race, color, religion, sex or national origin.

As an employee benefit, the center contributes to the overall mission of the National Aeronautics and Space Administration in the following ways: attraction and retention of quality professionals with infants and preschool children, reduction in employee turnover due to pregnancy and maternity leave, reduction in employee absenteeism due to child care problems, and reduction in staff training and orientation costs due to increased retention of trained staff members.

## CENTER PHILOSOPHY AND GOALS

Our philosophy is based upon the belief that we have the ability and responsibility to nurture each child's social, emotional, cognitive, and physical growth through interactions and experiences that foster a zest for life and a love of learning. The practices of LCDC Program are based on current knowledge of child development and early childhood education. We offer a child-centered program, which is inspired by the Creative Curriculum because children learn best through play and active involvement with the people and materials in their environment. We believe that "care" and "education" are inseparable and view each child as a feeling, thinking and creative individual whose growth we nourish. We believe a child's positive self-esteem is paramount to emotional, social, physical, and intellectual development. We are responsible for stimulating, guiding and enhancing the development of the whole child because all areas of development are considered inter-related and equally important. Our program acknowledges that children learn through active, hands-on involvement with their environment, peers, and caring adults. The daily environment we create for our children must provide them with all the components necessary for growth and development. Developmentally Appropriate Practices encourage the children to view themselves as capable human beings. Likewise, our program respects and supports the ideals, cultures and values of families in their task of nurturing children. We are committed to supporting the parents/guardians of our children by providing a variety of quality service and by developing positive relationships between home and school.

### Goals

- Foster positive identity and sense of emotional well-being
- Enhance social skills
- Encourage children to think, reason, question, and experiment
- Promote language and literacy development
- Build physical development and skills
- Support sound health, safety, and nutritional practices

- Advance creative expression, representation, and appreciation for the arts
- Appreciate and respect cultural diversity
- Develop initiative and decision-making skills
- Organize the class in ways that enhance children's optimal growth and development selecting materials to support the curriculum
- Create ongoing opportunities for discovery, exploration and experimentation to encourage children to think, reason, question and experiment through intentional activities planned by the teachers and those that emerge from the interests and needs of the children and families.
- Create an atmosphere of acceptance, mutual respect, fairness, consistency, clear limits, appropriate expectations and encouragement.
- Create an environment that will provide for active exploration, making free choices, a wide variety of hands-on experiences, and many opportunities to enhance language and early literacy development.
- Creating an outdoor environment as an extension of the classroom, requiring the same level of adult planning, supervision, and involvement with children. Daily outdoor play gives teachers opportunities to interact with the children; plan and carry out specific learning experiences, and share responsibility for the care of the play area.
- Constant supervision and concern for child safety shall always be a priority.
- Valued individual needs and differences in order to promote tolerance and respect for the diversity found within the LCDC as well as in the larger society because each child, family and staff member is unique.

-

### STANDARDS

The LCDC meets the physical, social, emotional, and intellectual needs of its children, providing an appropriate developmental curriculum, a stimulating learning environment, and supportive relationships between children, parents, and staff. In order to implement high quality programming standards, staffs are trained childcare professionals with backgrounds in early childhood education.

The standards implemented at the LCDC are based on the childcare center licensing regulations and guidelines of the Commonwealth of Virginia and national accreditation criteria. Also included in the operating standards are specific criteria developed by the Langley Exchange Council to address the unique needs of the Langley Research Center and its employees.

## PROGRAM EVALUATION

The program offered at LCDC is carefully planned by the LCDC staff to meet the various needs of the enrolled children and their families. The program is monitored by Office of Human Capital Management, Morale, Welfare, and Recreation of the Exchange, Operation Manager, and the Langley Exchange Council. Additionally, the program is evaluated yearly by the parents of children enrolled at LCDC. (NASA's **Office of Chief, Teacher,**) and the Administrator of Health and Medical Officer conduct reviews and assessments on Health and Safety Standards.

## STAFF REQUIREMENTS

The LCDC staff is comprised of trained childcare professionals with backgrounds and/or experience in early childhood education. Staff members with appropriate experience and training are hired to implement the educational and developmental aspects of the program.

### Educational Requirements of Staff

**Director** - Masters Degree in Early Childhood Education or Bachelors Degree with three years of experience as Director of child care facility.

**Lead Teacher** - Associate's Degree in Early Childhood Education, CDA, or equivalent experience.

**Teaching Assistant** – working on a CDA and experience in an early childhood setting, a CDA or enrollment in an Associate's Degree Program in Early Childhood Education.

**Staff members are carefully screened during the selection process, and receive orientation training before caring for the children. All staff members receive the following background checks and training:**

- Child abuse background check by the Virginia State Police and a national agency check by the Federal Bureau of Investigation.
- Certification in First Aid for Child Care Providers and Infant and Child Cardiopulmonary Resuscitation/ Automated External Defibrillator
- Orientation training in medication administration
- Orientation training in health screening
- Orientation training in developmental assessments
- Orientation training in curriculum development

- Orientation training in child guidance techniques
- Orientation training in other topics relevant to the child care industry.

### HOURS OF OPERATION

The LCDC is open Monday through Friday from 6:30 am to 6:00 pm, except on federally observed holidays. Children enrolled in the program may use the center during hours of operation.

Although staff members do arrive at the facility 15 minutes prior to the opening time, they are responsible for performing housekeeping duties and are unable to care for children earlier than 6:30 am. In addition, because the center does close promptly at 6:00 p.m., parents should allow themselves adequate time to talk with their child's caregiver and gather their child's belongings before closing time. **Parents who arrive after closing time will be charged a Late Pick-up Fee per family for each 15-minute increment in which they are late.**

**Children should not be left at the LCDC for more than 10 hours daily.**

### **The LCDC will be open for all workdays with the following exceptions:**

1. Hazardous weather and other emergencies:
  - a. The LCDC will be closed when the LaRC is closed due to hazardous weather and other emergency situations as determined by the LaRC Director or designee.
  - b. On days of hazardous weather, parents may call 864-2111 for a tape-recorded message about closings or listen to the local television or radio stations for announcements about closings. Parents are expected to pick their children up immediately when released from work due to hazardous weather closings. If the LaRC delays opening for two hours, the LCDC will open at 8:30 a.m. If the center delays opening for four hours, the LCDC will open at 10:30 a.m. The LCDC will close 30 minutes after employees are released from work.

### LIABILITY INSURANCE

The LCDC Exchange carries liability insurance to cover incidents, injuries or accidents, which are proven the result of negligence by the center staff or a deficiency in the center's equipment. The liability insurance does not cover injuries, which are not the result of negligence.

Parents who have questions or parents who want to make a claim should contact the LCDC Director for information about the appropriate procedures to be followed for processing a claim. The LCDC Director will provide the appropriate forms for making a claim.

Although LCDC does have access to the NASA Rescue Squad and the Occupational Health Clinic for injuries involving the children, the approved access is for serious conditions that may require immediate attention or emergency first aid. While the staff may take a child to the Occupational Health Center for evaluation following an injury, the parents will usually be referred to their own health practitioner for medical care, which does not require emergency first aid.

## **ADMISSION PROCEDURES**

### **ELIGIBILITY FOR ENROLLMENT**

Enrollment is open to children ranging in age from six weeks to five years old. Children with special medical conditions or developmental needs may be enrolled with the permission of the LCDC Director after a special needs training (SNT) screening process is completed. This SNT evaluation is comprised of the Center Medical Director, CDC Director, CDC Assistant director, and Hampton Family Services Representative.

### **FULL-TIME ENROLLMENT**

All permanent NASA Langley Research Center civil service employees, NASA support service contractors, NASA Langley non-appropriated funds employees, other on-site government personnel, on-site university personnel, and other contractors are eligible to enroll their children or dependants in the center on a full-time basis. Military Personnel may be enrolled on a space available basis, but not to exceed 25% of the total enrollment.

If the parent entitled to use the center services loses or changes his or her eligibility status due to an employment change, the parent is required to notify the LCDC Director. Parents will be granted two weeks to make alternative child care arrangements if withdrawal is required due to the eligibility change.

### **SPACE AVAILABLE ENROLLMENT**

When full-time students are on vacation or absent due to illness, their enrollment spaces may be used by eligible NASA Langley Research Center employees on a "space available" basis.

Eligible parents may make a daily reservation with the LCDC Director and pay a daily fee for their child's care.

### SUBLEASING

Subleasing of enrollment slots is not permitted.

### WAITING LIST

When the center is operating at full capacity for any age group (Infant, toddler, and preschool) a prioritized waiting list of eligible children will be maintained by age group. When an opening becomes available, the LCDC Director will first determine whether any promotions should occur in accordance with the Educational Curriculum section of this handbook. After promotions have taken place, available openings will be filled from the waiting list based on their priority on the waiting list and the date that their enrollment application was received. Check with the center director or the office manager for more information.

### WAITING LIST ENROLLMENT PROCEDURE

Priority on the waiting list will be based on the following guidelines:

1. Previously enrolled children who were removed from the center for behavioral or developmental difficulties, but who are eligible for reentry and previously enrolled children whose parents were given a NASA directed temporary reassignment (maximum one year), and who have returned to the Langley Research Center.
2. Siblings, born or adopted, of currently enrolled children, prioritized by employment status and the length of time on the waiting list.
3. Children or dependents of NASA Langley civil servants and other on-site government employees.
4. Children or dependents of NASA support service contractors and NASA Langley non-appropriated fund employees.
5. Children or dependents of on-site university or industry grant recipients with terms of one year or more and other contractors.
6. Children of Military personnel assigned in the local area.

Due to the great demand for childcare, applications for the waiting list will be accepted only from eligible parents who have confirmed pregnancies or who have children in the appropriate age range being accepted for enrollment. One application will be accepted for each confirmed pregnancy. As children get older and move up from one age group to another, they will be placed on the new age group's waiting list according to the date the application was received by the LCDC Director.

Parents will be offered an enrollment opening when their child's name is at the top of the waiting list for a given age group. Parents will be given 24 hours to decide if they want to accept or decline the enrollment offer. If the parents turn down the offer, their name will be removed from the waiting list and the opening will be offered to the next family on the list. After removal from the waiting list, parents must wait 90 days before reapplying. If a parent is offered an opening for an unborn child, the application may be bypassed and remain at the top of the waiting list for the next available opening.

Within 24 hours of acceptance, parents must pay the non-refundable registration fee in order for the slot to be reserved for their child. The slot will be reserved tuition free for a maximum of two weeks before the child begins attending the center. After the two-week reservation, the child must begin enrollment. If the parent is not ready to enroll the child at the end of the two week reservation period, or if the child is not old enough to be enrolled, the parent has the option to pay the weekly tuition fee in order to hold the slot until the child is placed in the LCDC or to place the child's name back on the waiting list as a new entry.

## FINANCIAL COMMITMENT

### **Registration Fee**

When offered an enrollment slot, parents are required to pay a **non-refundable annual registration fee** in order to reserve a space for their child until the first day of enrollment. An enrollment slot will be reserved for two weeks for a new student, after which the parents must pay full tuition and the child must begin enrollment. **The first weekly tuition payment is due on the first day of attendance.**

### **Security Deposits**

Each family is required to pay a **refundable security deposit** within the first 30 days of the child's attendance. The payment may be made in one lump sum or in four equal weekly payments during the first month.

## PARENT ORIENTATION

Prior to the first day of enrollment, all parents and prospective students are encouraged to schedule an Orientation Session with the LCDC Director or designee to review operating policies, to meet

the center staff, and to allow the child an opportunity to observe the center before the first day of attendance.

An Annual Parent Open House is held at the beginning of each school year to inform parents of the educational curriculum for the upcoming year, and to highlight special events and projects planned for the year.

Parents are reminded to coordinate with the LCDC administrative desk to begin the process for a 6-month badge for their spouse that does not have a NASA badge.

### REGISTRATION INFORMATION

**Prior to the first day of enrollment**, parents are required to furnish the following information:

1. A completed registration form
2. A parent agreement form
3. A family history form
4. A current immunization record
5. A signed Parent Reviewed form, which confirms that parents have reviewed Parent Handbook, and will comply.
6. Children are required to receive all age-appropriate immunizations recommended by the most current report of the American Academy of Pediatrics prior to the first day of attendance.

### CHILD'S HEALTH HISTORY

Prior to the first day of enrollment, parents are required to submit a completed physical examination form by the child's physician. If the child has had a physical examination within the last six months, the parents may ask the child's physician to fill out the form based on the results of the last physical examination.

**Parents are required to notify the LCDC Director of any changes in the child's health history and any immunizations, which are received after enrollment.**

Parents of children who have a special medical or developmental condition are required to submit an annual physical examination report from the child's physician to update the information about the child's condition. Parents of children who develop a special condition after enrollment are required to submit a report from the child's physician informing the center of the condition and any special instructions that need to be followed to care for the child.

**\*\*All parents are required to complete a Special Needs Checklist for their child. This will inform the Child Care Center of any health problems your child may have. \*\***

### **FOREIGN TRAVEL**

Parents who plan to travel outside of the United States with their child and plan to re-admit the child after the trip should consult with the LCDC Director prior to the trip to determine re-admission requirements. The LCDC Director will inform the parents of any special immunizations for infectious diseases or medical clearances for infectious diseases from the child's physician which will be required by the center before the child is re-admitted after the trip.

### **WITHDRAWAL PROCEDURES**

A two weeks written notification from the parents to the LCDC Director is required prior to the withdrawal of any child. If proper notification is received, the security deposit will be refunded on the last day of attendance or may be credited towards the last two weeks tuition.

Parents may be asked to withdraw their child under the following circumstances:

1. If it is determined that the child is unable to adjust to the program in a positive manner
2. The child's recurring-unmanageable behavior is placing the other children's safety or well-being at risk
3. The program offered at the center is unable to meet the special needs of the child.

When possible, the LCDC Director will give parents a two-week notice when a child is required to be withdrawn.

If a child's presence significantly endangers the safety or well-being of the other children in the center, immediate withdrawal may be required by the LCDC Director. When immediate withdrawal is required, parents will receive a refund of their security deposit and a pro-rated portion of any unused tuition.

If parents fail to comply with operating policies of LCDC or fail to honor financial obligations to the center, they may be required to withdraw their child (ren). If parents are more than two months behind in payment of tuition, they will be required to withdraw their child (ren) immediately.

### **NASA LCDC CENTER PROCEDURES**

## ARRIVAL AND DEPARTURE

An authorized adult is required to pick up, drop off a child, and sign the daily arrival/departure log recording the time and signature of the adult. The LCDC must have on file the names of all individuals authorized to pick up a child. Parents should notify the LCDC in writing when someone else will be picking up or dropping off a child to ensure the caregiver is aware of who is permitted to pick up or drop off the child that day.

Upon arrival, parents are responsible for the supervision of their child (ren) until the child (ren) is turned over to their teacher or teaching assistant in the classroom or on the playground. Upon departure, parents are responsible for the supervision of their child (ren) after they notify the teacher or teaching assistant that they are there to pick up their child (ren).

It is not permissible for children to leave the building or the playground without their parent, or to be left unsupervised in the parking lot. If it appears room assignments have been changed, take your child back to the front desk for further instructions. Staff members **may not** be asked to supervise children or siblings who are not enrolled in the center or who are not visiting for the purpose of orientation for enrollment.

*Parents with children in both the Infant Building and the Main Building should drop off the oldest child first.*

## Release of Children to Family and Friends

Parents must notify the center in advance if someone other than the parent is going to pick up their child. Parents must give written permission on the child's registration form to allow certain named friends or relatives to pick up their child. Staff members will release a child only to individuals, other than parents, who are at least 16 years old and who the child knows and appears to be comfortable leaving with. Staff members will also require that the individual verify their identity with a pictured identification card.

Children will be released to either parent unless the center has on file official court documents regarding custody, which specify that a particular parent is not authorized to pick up a child.

The safety of the child while in attendance at the center is the mutual responsibility of both the center and the parents. It is the LCDC's policy to deny parental access to a child if the parent appears to be either mentally or physically incapacitated when requesting release of the child. In the event that a parent is determined incapable of taking charge of his/her child, the following steps will be taken:

1. The other parent or guardian will be called to pick up the child.

2. If the other parent cannot be reached, the designated emergency contact will be called to pick up the child.
3. If the above efforts are unsuccessful, the NASA Security Office will be contacted for assistance.

**The same steps will be taken for any friend, relative, or guardian who appears mentally or physically incapacitated when requesting release of a child.**

### WHAT TO BRING FROM HOME

Parents are responsible for furnishing the center with the following items from home on a daily basis:

#### A. Infant Program

1. Three complete changes of labeled clothes
2. Eight labeled disposable diapers
3. Labeled diapering supplies (diaper wipes, powder, etc.)
4. Adequate supply of infant formula in labeled plastic bottles
5. Special blankets, infant activity box, or mirror, infant crib mobile, crib toys, etc. (optional)

#### B. Toddler Program

1. Two complete changes of labeled clothes
2. Six labeled diapers if child is not potty trained including diapering supplies (diaper wipes, etc.)
3. Labeled diapering supplies if child is in diapers or being potty trained
4. Five labeled training pants, five labeled plastic pants, and one diaper for nap time if child is being potty trained.
5. Nap Time blanket (if needed)
6. Special toy to sleep with (if needed-please no noisy toys)

#### C. Preschool Program

1. One complete change of labeled clothes
2. Nap Time blanket (if needed)
3. Special toy to sleep with (if needed)

## TOYS FROM HOME

### Infants

Parents may bring in special toys or stimulation items for their child's crib. The items will be kept in the crib and sent home when they are no longer age-appropriate for the child.

### Toddlers and Preschoolers

Because the LCDC is well equipped with educational toys, parents are asked to keep children's personal toys at home unless the child needs a special toy to sleep with or unless the child has a toy, which will contribute to the educational curriculum and relates to the specific subject matter being explored in the class.

If a child does bring a personal toy to the center, the toy should be turned over to the teacher upon arrival to be placed in the child's cubby. The child must be willing to keep the toy in the cubby unless the teacher gives permission for the child to play with it. The child must be willing to share the toy with the other children or the toy will have to be taken home. **The center cannot be responsible for toys from home that gets lost or broken.** War toys or toys, which glorify violence, are not allowed at the center.

## FEES AND CHARGES

All families are required to pay a security deposit per family during the first 30 days of enrollment. Payment may be made in one lump sum or in four equal weekly payments during the first month of enrollment.

#### Annual Registration Fee

Parents are required to pay an annual registration fee for each child enrolled in the center. The annual registration fee of \$60.00 per year due in two \$30.00 installments (April 15 and August 15) or upon registration. This registration fee is non-refundable. The registration fee covers the cost of new educational equipment for the classrooms and the playground, art supplies, curriculum resource materials, and staff developmental training.

#### Sibling Discounts

Parents with two or more children enrolled and attending on a full-time basis will receive a discount on the siblings' weekly tuition.

#### Vacation or Sick Week Discount

Each September, all children receive a credit for four vacation/sick weeks to be used from September 1 to August 31. During your selected 4 weeks, tuition equals one-half of the regularly charged rates. In order to receive a vacation credit you must fill out a vacation leave form 2 weeks in advance and your child has to be absent at least 3 days that weeks. Vacation cannot be carried over to the next year. Sick weeks may be credited towards a future week if the tuition payment for that week has already been paid in full. Sick leave adjustment should be made within 30 days.

#### Late Payment Fee

Tuition Payments are due by the 15<sup>th</sup> of the month. Parents will be charged a **\$25.00 dollar** late payment fee if payment is not received by the 15 of the month.

Parents that become delinquent for 30 days will be given a notice that childcare services will be discontinued if payment in full is not received before the end of 45 days.

The NASA Exchange shall automatically refer your principal debt along with all late fees and charges to include 20% interest to the Department of the Treasury for collection, to a credit service bureau and possibly to the Internal Revenue Service (IRS) for tax refund offset unless a acceptable written repayment agreement is signed by the sponsor and Exchange "Finance Office Representative.

Parents with billing questions should contact the Exchange Finance Office at 864-9401 or 864-6368.

#### Late Pick-up Fee

Parents who pick their children up after closing time (6:00 PM) will be charged a \$15.00 late pick up fee for every 15 minutes late after normal closing hours (i.e. picking up children between 6:00 pm to 6:30 pm, etc.)

#### Returned Check Fee

Checks returned for any reason by the parent's bank or credit union will be charged a penalty per check. If three checks by one family are returned within a one year period, the family will be required to pay tuition with cash or payroll deduction only.

#### Diaper Charges

Parents are responsible for providing an adequate supply of diapers for their child on a daily basis. If a child's supply runs out during the day, the center will supply additional diapers. Parents will be notified of the charges and payment may be made separately or included in the next week's tuition payment.

#### Current Fees and Charges

Exchange Accounting office bills based on the number of care days in the month times the daily rate. Please pick-up a current rate sheet at the front desk.

### **EDUCATIONAL CURRICULUM**

#### PROGRAM GOALS

1. Provide a warm, loving and secure environment staffed with trained child care professionals, which encourages each child's development of a positive self-concept, positive socialization skills, self-help skills, and a feeling of trust in other human beings.
2. Provide an environment, which encourages sound health, safety and nutritional practices.
3. Provide a variety of developmentally appropriate activities and materials that are selected to emphasize concrete experiential learning in the areas of reasoning, language, visual perception, fine motor, and gross motor skills.
4. Provide open communication with parents regarding their child's daily activities, individual needs, and developmental progress.
5. Provide developmental screenings to identify special developmental needs of individual children and make referrals for special services when appropriate.
6. Encourage creative expression and an appreciation for the arts.
7. Respect cultural diversity of children, parents, and staff.

### Child:Teacher Ratios

The Center is committed to adhering to these NAEYC ratios. The following chart shows a Comparison of NAEYC and Virginia State: Child Ratios

NAEYC Staff/Child Ratio		VA. State Staff/Child Ratio	
6 weeks-14 months	1: 4	Birth – 16 months	1:4
15 months – 24 months	1:5	16 month- 2 year	1:5
24 months – 36 months	1:7	2 year olds	1:8
3 years – 4 years	1: 10	3-5 year olds	1:10
4 years – 5 years	1:10	3-5 year olds	1: 10
Summer Program Age 6-8	1: 12	5-8 year olds	1:18
Summer Program Age 9-12	1:15	9-12 year olds	1:20

Low ratios and small groups are important criteria of quality care. The Center also follows NAEYC guidelines and keeps group sizes at two-times ratio (i.e. two caregivers can care for a maximum of eight infants or fourteen 2-year-olds). LCDC center policy for designated rest/sleep period is as follows; the ratio of staff to children may be double the number of children to each staff. **However, for 1:4 ratio classrooms, the staff/child ratio will remain the same.**

#### Supervision of Children

Appropriate adult supervision is required at all times, both in the classroom and on the playground. No child is ever to be left unattended or out of a teacher's sight.

School age children must always be within a supervising adult's earshot but may occasionally walk in the hall or to the restroom alone or with a friend.

#### CREATIVE CURRICULUM

The philosophy behind our curriculum is that young children learn best by doing. Learning is not just repeating what someone else says; it requires active thinking and experimenting to find out how things work and to learn firsthand about the world we live in.

Play provides the foundation for academic or “school” learning. It is the preparation children need before they learn highly abstract symbols such as letters (which are symbols for sounds) and numbers (which are symbols for number concepts). Play enables us to achieve the key goals of our early childhood curriculum. Play is the work of young children.

Our curriculum identifies goals in all areas of development:

- Social: to help children feel comfortable in school, trust their new environment, make friends, and feel they are a part of a group.
- Emotional: to help children experience pride and self-confidence, develops independence and self-control, and have a positive attitude toward life.
- Cognitive: to help children become confident learners by letting them try out their own ideas and experience success, and by helping them acquire learning skills such as the ability to solve problems, ask questions, and use words to describe their ideas, observations, and feelings.
- Physical: to help children increase their large and small muscle skills and feel confident about what their bodies can do.

The activities planned for children, the way the environment is organized, the selection of toys and materials, the daily schedule, and talking with children, are all designed to accomplish the goals of our curriculum and give your child a successful start in school.

### CLASSROOM ROUTINES

Each classroom is staffed with a full-time teacher and one or two full-time teaching assistants to comply with teacher/child ratios. A daily schedule of activities is posted in each classroom, along with monthly lesson plans for the class. Monthly lesson plans and a parent’s newsletter are sent home at the beginning of each month.

Each classroom follows a daily schedule, which is planned to provide a balance of activities in the following areas:

- Indoor/Outdoor
- Quiet/Active
- Individual/Small Group/Large Group
- Child Initiated/Staff Initiated

### DEVELOPMENTAL SCREENINGS

Confidential developmental screenings are performed with parental consent by trained staff members and professionals:

1. To identify the developmental levels of the child so that lesson plans and curriculums used in each classroom can be individualized to the needs of the child.
2. To identify special needs of the children which may require further diagnostic testing, medical evaluation, and referral for special educational services.

### PARENT CONFERENCES

The Lead Teachers will hold regularly scheduled conferences with parents for the purpose of sharing and gathering information about the children in their care. Such conferences should occur at least annually or at the time of transition. Teachers view themselves as important resources for each child and family. While parents are the child's most important teacher, sharing information about development and learning is a primary way to collaborate for success.

The Center implements the NAEYC standards by having conferences three times a year. Parents may request a meeting with their child's teacher or primary caregiver at any time. Parents and staff exchange daily feedback concerning the child's day in all classrooms. Parents with children in the Infant Program receive daily oral reports and a written daily report specifying diaper changes, meals, special activities, outdoor time, naptime, and medications.

Parents of children in the Toddler Program receive daily oral reports and written information on a chart in the classroom. Parents of children in the Preschool Program receive daily oral reports. Parents are welcome to request a conference with their child's teacher or the LCDC Director at any time.

### STUDENT PROMOTIONS

A child is promoted to a new classroom when the LCDC Director determines that the child is developmentally ready to be promoted and when there is an available opening in the classroom to which the child will be promoted. Most promotions occur in the late summer as kindergarten children graduate out of the program and openings arise, rather than on the child's birthday.

Weekly tuition fees are based on the child's classroom assignment with a particular staff/child ratio and changes after a child is promoted to a new classroom with a different staff/child ratio.

### FIELD TRIPS

Children enrolled in the Preschool Program enjoy field trips to local sites of interest, including:

- The Virginia Living Museum
- Newport News Park
- Air & Space Museum
- Interpretive Center
- The Institute of Marine Science
- Pumpkin Patch

Transportation is provided in a NASA Langley van or bus. Written parental permission is required before children are allowed to participate in the field trips.

### PARENTAL INVOLVEMENT

Parents are invited to share their talents with the children as classroom volunteers, guest lecturers, and chaperones on preschool field trips, staff trainers, parent education trainers, and assistants at seasonal social events. Parents receive credits towards their tuition fee through the "Why I'm Needed" (WIN) program. A brochure is available at the front desk that explains the program. Parents choose what volunteer support they would like to perform from a monthly calendar developed by each classroom teacher.

## **NUTRITION PROGRAM**

### **MEAL TIMES**

Good nutrition, the development of desirable eating habits, and learning about food choices are vital building blocks for young children. Provisions must be made to ensure that these building blocks are in place in order to promote good health throughout life. As part of the USDA food program, the following are some responsibilities of our childcare center:

- To serve meals meeting program requirements.
- To keep daily records of participants in attendance, number of meals served, and quantities of food prepared and served.
- To collect household size and income information on Applications for Free and Reduced-Price Meals.
- To comply with all regulations and instructions relating to the Child/Adult Care Food Program (CACFP).

**Breakfast is served from 7:45 a.m. – 8:30 a.m.**

**Lunch is served from 11:00 a.m. – 12:00 p.m.**

**Snack is served at 2:30 p.m.**

**If a child arrives after breakfast or lunch is served, please make sure the child has eaten before entering the classroom.** Children enrolled in the LCDC will only be served food approved by USDA. If a child has any allergies or religious dietary restrictions that will restrict what he/she may eat at the LCDC, a written documentation must be provided to be placed in the child's file.

### **Parent Meals**

Parents are welcome to join their child for meals or may pick their child up and take them out for lunch. Parents are asked to notify their child's teacher or the front desk in advance if they plan to join their child for a meal so that adequate servings can be prepared. Parents are charged a nominal fee of \$2.00 for breakfast, \$3.00 for lunch, and \$1.75 for the afternoon snack.

Parents who join their children for lunch in the Toddler and Preschool Programs are asked to partake in the meal served to the children, rather than bringing their own lunch into the classroom.

### **Celebration of Birthdays**

Birthdays are celebrated after naptime in the afternoons. Parents are welcome to join their child for the celebration and should inform their child's teacher about birthday plans in advance. Parents may bring in a cake or cupcakes from a bakery or store (no handmade items allowed) to share with their child's classmates. Though the center can furnish paper plates and napkins, parents may provide special birthday plates and napkins if they so desire.

## **RESTRICTED DIETS**

Because the center is required to follow specific menu guidelines to assure a well-balanced food service program, all children will be served what is scheduled on the menu unless the child has a special medical condition or religious beliefs, which require a restricted diet.

Modified diets may be served only for special medical conditions or religious beliefs and must have the approval of the LCDC Director. Children with special dietary restrictions due to medical conditions will need the approval of the child's physician for the requested dietary modifications. Parents must provide a form completed by the child's physician stating the reason for the requested modification, a list of restricted foods, a list of acceptable substitute foods, a description of the child's reaction if the restricted food is eaten, and any first aid requirements if the child eats the restricted food.

The modified diets will be developed from the regular stock items kept at the center and must be able to be prepared quickly, economically, and without undue inconvenience to the food service manager. In some circumstances where the center cannot realistically provide the modified diet, the parents will be allowed to bring in food from home on a regular basis for their child. The child's tuition will not be reduced if parents bring in food from home.

## **HEALTH POLICIES**

### **CONTROL OF CONTAGIOUS ILLNESSES**

In order to prevent and control the spread of communicable illnesses among the children and staff, strict health policies must be followed at the center. Cooperation between staff and parents is essential to ensuring a safe and healthy environment for all of the program participants.

All children will be visually screened by staff upon arrival for obvious symptoms of illness. Children displaying symptoms of contagious illness and children who are not well enough to participate in the daily activities will not be admitted. Parents are required to inform staff members about any symptoms of illness that the child has been exhibiting at home and to inform the staff if the child received any medication before arrival.

Parents are also required to notify the staff if their child has been exposed to a communicable illness so that appropriate precautions to prevent the spread of the illness can be taken to prevent the spread of the illness. The LaRC Health Clinic Medical Director and physician assistant will determine appropriate preventive measures to be taken to prevent the spread of communicable illnesses in the LCDC. The LCDC is required to report any contagious disease to the Health Clinic and Virginia Health Department.

Parents will be notified if their child becomes ill at the center and will be expected to pick the child up within 30 minutes. Until the child is taken home, efforts will be made to isolate the sick child from the other children.

LCDC follows guidelines prescribed by the American Academy of Pediatrics in Managing Infectious Diseases in Child Care and Schools. Children displaying the following illness or symptoms shall be temporarily excluded from the LCDC:

- The illness prevents the child from participating comfortably in activities as determined by the staff of the child care program or school; or
- The illness results in a greater need for care than the staff of the program determines they can provide without compromising their ability to care for other children; or
- The child has any of the following conditions:
  - Appears to be severely ill. This could include lethargy/ lack of responsiveness, irritability, persistent crying, difficult breathing, or having a quickly spreading rash.
  - Fever (temperature above 101°F [38.3°C] orally, above 102°F [38.9°C] rectally, or 100°F [37.8°C] or higher taken axillary [armpit].
  - Diarrhea-defined by 3 or more watery stools or decreased form of stool that is not associated with changes of diet.
  - Blood or mucus in the stools not explained by dietary change, medication, or hard stools.
  - Vomiting more than 2 times in the previous 24 hours, unless the vomiting is determined to be caused by a non-communicable condition and the child is not in danger of dehydration.
  - Abdominal pain that continues for more than 2 hours or intermittent pain associated with fever or other signs or symptoms.
  - Mouth sores with drooling unless the child's physician or local health department authority states that the child is noninfectious.
  - Rash with fever or behavioral changes, until a physician has determined that the illness is not a communicable disease.
  - Tuberculosis, until the child's physician or local health department states child is on appropriate treatment and can return.
  - Thrush, child may not return until 24 hours after medication to mouth sores has begun.
  - Impetigo, until 24 hours after treatment has been started.
  - Streptococcal pharyngitis (i.e., strep throat or other streptococcal infection), until 24 hours after treatment has been started.
  - Head lice or nits, until after the first treatment. (Note: exclusion is not necessary before the end of the program day.)
  - Scabies, until after treatment has been given.
  - Shingles, child may return only if the sores can be covered by clothing and/or dressing or until sores have crusted.

- Chickenpox (varicella), until all lesions have dried or crusted (usually 6 days after onset of rash).
- Persistent abdominal pain (continues for more than 2 hours) or intermittent abdominal pain associated with fever, dehydration, or other signs or symptoms of illness.
- Rubella, until 6 days after the rash appears.
- Pertussis, until 5 days of appropriate antibiotic treatment.
- Mumps, until 5 days after onset of parotid gland swelling.
- Measles, until 4 days after onset of rash.
- Hepatitis A virus infection, until 1 week after onset of illness or jaundice or as directed by the health department (if the child's symptoms are mild). (Note: protection of the others in the group should be checked to be sure everyone who was exposed has received vaccine or receives vaccine immediately.)
- Purulent Conjunctivitis: Defined as pink or red conjunctiva with white or yellow eye discharge, often with matted eyelid after sleep, and including a child with eye pain or redness of the eyelids or skin surrounding the eye, until 24 hours after treatment has begun.
- RSV: Child with a positive RSV test may not return until fever free for 24 hours and until severe respiratory symptoms have subsided, allowing the child to have a normal, responsive day.
- Ringworm Infection: Defined as tinea capitis, tinea corporis, tinea cruris, and/or tinea pedis. Child may not return until 24 hours after treatment has begun.
- Any child determined by the local health department to be contributing to the transmission of illness during an outbreak.

**\*\*For more details and other diseases, see the Web Site Healthy Children-Powered by Pediatrics & Trusted by Parents which is part of the American Academy of Pediatrics-  
<http://www.healthychildren.org/english/health-issues/conditions/Pages/default.aspx>**

A child may return to the center prior to the above guidelines if the child's physician provides a statement, in writing, to the LCDC Director stating that the child is no longer contagious.

Even if a child does not display any of the above noted symptoms, the LCDC Director or Assistant Director has the discretion to exclude a child pending a physician's written statement that the child is safely able to return to a group care environment.

### RE-ADMISSION FOLLOWING ILLNESS

Children may be re-admitted after an illness only when their presence will not endanger the health of the other children and when they are well enough to participate in the regularly scheduled daily activities.

A child may return to the center when:

1. Fever has been 100 degrees F or below for 24 hours, without fever-suppressing medication.
2. Nausea, vomiting, or diarrhea has subsided for 24 hours.
3. Four to eight doses of an antibiotic have been given over a 24 hour period for known strep infection, and the child does not complain of sore throat pain.
4. Chicken pox lesions are crusted, usually 5 to 10 days after onset.
5. Scabies is under treatment.
6. Lice are under treatment and the hair is free of nits.
7. Pinworm treatment has occurred 24 hours before time of requested re-admission.
8. Lesions from impetigo are no longer weeping.
9. Conjunctivitis treatment has occurred for 48 hours and the eyes are no longer discharging.
10. Thrush or yeast infection has been treated with prescription medication for at least 24 hours.
11. The child has completed the contagious stage of the illness as outlined by the LCDC Director.
12. The child feels well enough to participate in the daily activities at the center, including outdoor play.

Children may not be re-admitted following a communicable illness, unless they are absent for the amount of time specified by the LCDC or provide a written statement or a telephone call from the child's physician verifying that the child is no longer contagious.

### Health and Safety Inspections

The Child Development Center is inspected on a regular basis by various internal and external officials to assure compliance with laws, regulations operating policies, and procedures regarding the health, fire, safety, facilities and the overall environment of your child's care.

<u>Types of Inspection/Inspector</u>	<u>Frequency</u>
Occupational Health Inspection of Kitchen and Food Service Operation	Monthly
Organizational Safety and Facility coordinators Inspection	Monthly
Fire/Safety Inspection (NASA-OSEMA)	Annually Plus spot checks
Fire Drills (NASA SSQR, Safety and Env. Mgmt. Sec.)	Monthly
Janitorial Services (LCDC Director)	On-going
Office of the Chief of Health and Medical Director (NASA Occupational Health Program Staff)	Tri-Annual
LaRC Child Care Evaluation Team	Annually

### **ADMINISTRATION OF MEDICATION**

Parents are encouraged to administer medication to their own children at home before or after attendance at the center or to come to the center during the day and administer their own child's medication. When this is not possible, the center's MAT (Medical Administration Training) staff will administer medication under strictly monitored conditions. Staff members will administer short-term prescription medication with written permission of the parent, long-term prescription medication with written parental permission and written authorization by the child's physician, and over-the-counter medication for short-term illnesses with written parental permission and verbal authorization by the child's physician.

#### **Short-Term Prescription Medication:**

Written authorization from the parent to administer prescription medication for a short-term illness will be effective for 10 days. Parents must complete a new permission form every other Monday

with instructions as prescribed by the child's physician for the duration of the illness and the medication period.

#### Long-Term Prescription Medication:

Written authorization from the parent and the written approval of the child's physician is required to administer prescription or non-prescription medication for a chronic illness or medical condition of duration longer than 10 days. The physician's authorization will be effective for a period not to exceed 90 days, after which the physician must reevaluate the child's condition and re authorize the medication for its continued administration. The physician's authorization shall identify the child's long-term illness, its communicability and symptoms, any special care that the child requires during the illness, and the period for which the medication is to be given. Parents must keep the staff informed about any changes in the child's condition or changes in the physician's prescribed treatment plan for long-term illnesses.

No blanket prescriptions for over-the-counter medication, such as aspirin, acetaminophen, decongestants, or cough suppressants will be accepted for non-specific illnesses or symptoms. The child's physician must specify the illness, symptoms, or medical history, which requires the administration of the over-the-counter medication on a long-term basis. The physician must also specify the medication time span, within the 90-day limit, and designate the date within the 90-day period when the child should be reevaluated.

#### Non-Prescription Medication

Over-the-counter medication for short-term illnesses will be administered with the written authorization of the parent and the verbal approval of the child's physician or physician's designee. Authorization to administer over-the-counter medication will be effective for one week, from Monday through Friday. Each Monday, the parents must provide written permission and obtain verbal physician's approval for the medication to be re administered for another week.

Based on the symptoms reported to the physician by the parent, the physician can evaluate the child's condition and prescribe appropriate medical treatment using over-the-counter medication. The physician shall evaluate whether the child's condition needs to be examined prior to the approval of the medication, whether the child is exhibiting communicable symptoms, and whether the child's symptoms are indicative of a more serious illness than suspected by the parent. After evaluating the child's condition, the physician, or physician's designee, will telephone the center and approve or disapprove the over-the-counter medication requested by the parent.

### Storage of Medication

All medication must be current and stored in the original container. Prescription medication must have a label affixed by the pharmacy or physician's office, which states the child's name, the name of the medication, the dosage amount, the time of administration, the physician's name and the prescription number. Over-the-counter medications must be current and must be labeled by the parent with the child's name.

All medications must be kept out of the reach of the children. Medications, which require refrigeration, are stored in the small medicinal refrigerator in the isolation area near the front desk. Medications, which do not require refrigeration, are stored in a file box in the isolation area near the front desk.

All medications are to be taken home by the parents on Friday afternoons. Parents should take the medication home earlier in the week if the administration of the medication is not required for the entire week. All unlabeled medication bottles will be disposed of.

### Documentation of Medication

Staff members will document all medication given to a child at the center, noting the time and dosage of each administration, and specifying the staff member who administered the medication. The medication permission forms, approval forms from the child's physician, and administration documentation shall all be filed in the child's permanent record for future reference.

## **INJURIES AND MEDICAL TREATMENT**

### EMERGENCY MEDICAL TREATMENT

The center will not admit any child whose parent has not given written authorization that emergency medical care may be administered to the child in an emergency where the child's health condition represents a serious or imminent threat to life, health, or well-being. Conscious efforts will be made to notify a parent prior to such action. However, emergency first aid and medical treatment may be provided without additional consent under the provisions of the signed emergency medical care agreement kept on file at the center in the child's permanent file.

Children who develop conditions after admission that require immediate medical attention will receive emergency first aid from trained staff members, the NASA Langley Medical Emergency Team, or emergency medical personnel at the NASA Langley Occupational Health Center.

Two staff members shall always be present on the premises during hours of operation when enrolled children are in the facility and being supervised by staff members. In the event of a

medical emergency, one staff member shall stay with the injured child while the other staff member summons emergency medical help. The LCDC has two Automated Emergency Defibrillators (AEDs) equipped for infant/child/adult capabilities for use in the event of cardiac arrest. The Center has several staff that are trained Basic Life Support instructors that are qualified to train all staff members as AED/CPR responders.

Serious injuries requiring emergency first aid will be reported to the parents immediately. The parent will be notified of the details of the injury and summoned to the center or summoned to meet the staff member and injured child at the designated emergency medical facility.

Conditions that require immediate medical care include but are not limited to:

1. Convulsions
2. Marked difficulty breathing
3. Unconsciousness
4. Laceration, either significant in size or bleeding
5. Injury to an extremity with obvious deformity
6. Head trauma associated with vomiting or altered consciousness
7. Cardiac arrest

### MINOR HEALTH PROBLEMS

Minor injuries, such as small scratches, cuts, scrapes, bruises or discoloration's of the skin will be reported to the parents at the end of the day. If an injury is minor but significant, the staff will notify the parent by telephone so that the parent can come to observe the child's injury or call the child's physician for medical advice concerning non-emergency treatment. When there is a question about the course of action to be taken, the LCDC Director or designee will consult with the pediatric consultant on the Advisory Board, the NASA Langley Occupational Health Center, or the child's physician.

All injuries occurring at the center will be documented by the LCDC Director or designee and filed in the child's permanent file. If requested, parents may have a copy of the incident report.

### Child Abuse and Neglect

**Child care providers are mandated by state law to immediately report any suspected child abuse or neglect to NASA Security, Office of Human Capital Management, and Virginia Department of Social Services. A written statement is signed annually by all staff and parents in the Center indicating their awareness of this policy. The number one priority of the Center is to protect all the children in its care.**

## **Confidentiality**

All children and families have the right to expect that all information about their family will be kept confidential. A child's behavior and development should be discussed only with his or her teachers and parents. A parent does not have the right to know who injured their child (pushing, biting, etc.); however, they do have a right to know the circumstances and how both children were cared for or disciplined. All staff members are committed to abiding by the NAEYC Code of Ethical Conduct regarding respect and confidentiality. Children's records are stored in secure file cabinets and computer files at the Center. Only authorized personnel will be given access to personal information.

## **Photographs and Recordings**

All children may be photographed or recorded to develop videos, published material, or news releases, with the understanding that a family's privacy will be respected and honored. Teachers and students may also photograph or record children for the purpose of course assignments or for educational or scholarly purposes. Identifiable photographs will not be used on the Internet without prior specific approval from the parents.

## **Communication and Privacy**

We protect the privacy of our staff and the families we serve, all staff and families are expected to follow these guidelines:

- Use email to communicate with Center families only on Center-related matters.
- It is acceptable to email the families in your child's class for strictly social purposes (for example to invite them to your child's birthday party)
- Email addresses distributed by the Center are NOT to be used for personal financial gain (for example to invite them to a Pampered Chef party) or for any political purposes whatsoever. If you have any questions about the appropriate use of the Center's email addresses check with the Center's administration.

## **CHILD GUIDANCE & DISCIPLINE**

The goal of the Center's child guidance policy is to build self-worth, increase social competence, and enhance the dignity of each child. All guidance and discipline techniques used at the Center will be in accordance with this positive emphasis. The purpose of any set of procedures should be to teach children to learn how to control themselves in various situations.

Positive approaches to guidance include the following:

- Staff will have a well-designed, developmentally appropriate learning environment and provide developmentally appropriate learning experiences.
- Staff will know and be sensitive to the developmental, cultural, and individual needs of each child.
- When inappropriate behavior occurs, the teacher shall examine the situation thoroughly to determine the cause; for example, a child may be reacting to something in the classroom, stress at home, a physical problem, or some other factor.
- The teacher shall be responsible for documenting patterns of inappropriate behavior and bringing such patterns to the attention of parents and to the center director.

The goal of developmentally appropriate guidance is to help children learn to make socially acceptable choices. For this reason, teachers strive to use mediation, guidance, and various techniques to assist children in making acceptable choices.

Our goal and approach is to give children the tools they need to become good friends and good citizens.

The Center follows procedures as outlined below in encouraging self-discipline:

#### Infants and Toddlers

When working with infants and toddlers, teachers will use such strategies as prevention, distraction, encouraging, modeling, and enticing the child to a new activity. Infants and toddlers should never be put in time out because it is developmentally inappropriate for this age group.

#### Three, Four, Five Year Olds and School agers

Similar techniques such as prevention, redirecting, humor, reminding, encouraging, modeling, discussing, problem solving, and conferencing will be used with preschoolers and school age children. Calm down time may be used as a behavior management technique to assist in solving an on-going or habitual behavioral problem for this age group. Calm down time will be no longer than one minute per year of the child's age. Calm down time will be followed by redirection and positive encouragement.

The LCDC does not permit ANY FORM of corporal punishment or physical force. These discipline techniques are NOT permitted:

- A child is NEVER to be deprived of food, water, a nap or rest, a comfort item from home, or bathroom facilities!
- Unsupervised isolation of a child is NEVER allowed! “Time Out” shall rarely be used. Instead, teachers will use a “calm down” time to help children compose themselves before returning to play. Further, it is recommended that more appropriate methods of redirecting and/or guiding children, as described in Developmentally Appropriate Practices (Bredekamp & Copple; 1997), be used with four years of age and older.
- Adults are expected to always show respect for children by NEVER addressing a child harshly with intimidation or ridicule.

Also, in accordance with the NAEYC Code of Ethics, Center personnel will not discuss a child’s behavior with other adults, in the presence of other children, or with other parents. Written or verbal reports to parents regarding conflicts will guard confidentiality by not revealing the name of any other children involved in a particular incident.

Staff members will encourage parents to use these same approaches to guide and discipline their children.

**All parents and staff are required to sign the Center’s Child Guidance & Discipline Procedures Agreement.**

#### Withdrawal for Problem Behaviors

If improvement is not shown in the child's behavior following the conference, the LCDC Director will consult with the Langley Exchange Operations Manager to determine if withdrawal of the child from the program is appropriate. If the withdrawal is approved, the LCDC Director will notify the parents that they will need to withdraw their child. When possible, the LCDC Director will give the parents two weeks’ notice before the withdrawal must go into effect. However, if the problem behavior exhibited by the child drastically endangers the safety or the well-being of the other children in the program, immediate withdrawal may be required. A pro-rated portion of any paid tuition and the security deposit will be refunded when withdrawal is required. The LCDC Director will notify the parents of the earliest date when they can apply for re-admission to the program after the problem behavior has been extinguished.

#### Management of Biting Behaviors

Biting is not uncommon when infants and toddlers respond to the discomfort of teething and when they are beginning to express their strong likes and dislikes. Biting can also occur when children are seeking adults’ attention or when they are adjusting to sharing their space and their materials.

Biting occurs most frequently when children's language is just emerging – it is sometimes their most effective strategy for expressing their emotions.

We wish that biting never happened – but it does. You can be assured that the Center's staff supervises all children at all times. When working with a child who is using his/her teeth to solve his/her problems, our teachers and caregivers target their efforts to prevent injuries and to change this behavior as quickly as possible.

Teachers model and encourage children to “use their words” to solve their problems. They also model and encourage other appropriate ways to express strong emotions. They may say, for example, “If you are upset you can stamp your feet!” Teachers and administrators also make every effort to work with parents to eliminate this behavior and can suggest methods for changing the biting behavior, books to share with children, etc.

If a child should be bitten, these procedures are followed:

- The child who was bitten receives necessary first aid immediately. He/she is comforted and the injury is washed with soap and water.
- The teacher fills out an Incident Form describing what happened. It is put in the files of both the child who was bitten and the child who did the biting.
- If the skin was broken, parents of the child who was bitten are called immediately. If the skin was not broken, the incident is discussed with the parent(s) when the child is picked up.
- The NAEYC Code of Ethics requires us to carefully maintain confidentiality. That means that when we discuss issues of concern we will share information about your child ONLY with you.

For additional information about biting, you may want to review:

Dealing with Biting Behaviors in Young Children

<http://ceep.crc.uiuc.edu/poptopics/biting.html#parent>

Understanding Children: Biting <http://www.extension.iastate.edu/publications/PM1529A.pdf>

Biting Among Toddlers and Twos: Responses to Try <http://www.oh-pin.org/articles/pex-08-biting-among-toddlers-and.pdf>

Biting Hurts! <http://www.oh-pin.org/articles/pex-08-biting-among-toddlers-and.pdf>

## **PARENTAL RESPONSIBILITIES AND REQUIREMENTS**

The LCDC is a service provided to the members of the non-profit corporation. Along with LCDC staff members, parents are a key element in ensuring that the operating policies set forth in this Manual are followed. More importantly, parents play a significant role in ensuring that the LCDC runs as smoothly as possible to provide a safe, comfortable atmosphere for all children attending

LCDC. As a result, it is important that parents follow a code of conduct designed to foster a high quality, safe and educational--yet nonetheless efficient--environment.

The following basic requirements must be followed, and the acknowledgement of this Code of Conduct must be memorialized by execution of the Parental Acknowledgement Form:

- Parents must provide the Director with current medical information on their child/children.
- Parents must sign their child in/out every time the child enter/exits the LCDC. This includes appropriate use of the temporary check-out book located at the front desk.
- Parents must ensure that their child is properly clothed for the appropriate seasonal temperature, and that a weather appropriate change of clothes has been provided for their child.
- Parents must ensure that their child is provided with athletic or other appropriate closed toed shoes for safe outdoor play.
- Parents must ensure that their child is properly fed prior to coming to the LCDC, or arrives in time for a scheduled meal at the LCDC.
- Parents must inform the Director when their child has been exposed to or has a contagious disease.
- Parents must inform the LCDC when their child will be absent.
- Parents must inform the LCDC staff as soon as possible when their child's arrival/ departure will vary by more than 60 minutes from normal. A child's normal arrival/ departure time is indicated on the Child Admission Form.
- Parents must take each child to his/her class upon arrival.
- Parents must notify the caregiver responsible for the child when the child is departing the center.
- Parents must pick up children within 30 minutes when notified by the Director (see "Health and Safety Policies" and "Management of Aggressive Behaviors").
- Parents are prohibited from using LCDC facilities and/or resources for personal gain.
- Parents are prohibited from using any and all forms of physical and verbal abuse at LCDC, including without limitation, yelling, shouting, the use of profanity, name calling, shaming, making derogatory remarks to or about any child (including their own child), a child's family or an LCDC staff member, and/or using language that threatens,

humiliates, or frightens a child, a child's family or an LCDC staff member. Corporal punishment is prohibited at LCDC.

## **LCDC PARENT TEACHER ASSOCIATION**

### **MEMBERSHIP**

All center staff members and parents of enrolled children are members of the NASA Langley Child Development Center Parent Teacher Organization (LCDC PTO). The PTO serves a function very similar to that of a Parent Teacher Association in the public school system, and allows parents an opportunity to participate in a variety of activities which support and enrich the programs offered at the center.

### **ACTIVITIES**

The PTO supports and enriches the programs offered at the center in the following ways:

- Sponsorship of social events for the children, such as seasonal parties in fall, winter and spring.
- Sponsorship of fund raising events, such as participation in the NASA LCDC school pictures sales.
- Purchase of educational classroom supplies and playground equipment.
- Subsidization of staff training expenses to national educational conferences.

### **OFFICERS**

The Association has elected officers of president, vice president, treasurer, and secretary who serve one year-terms.

## **CONFLICT RESOLUTION**

When a concern arises, please discuss the concern with the teachers first to seek a resolution. The Center Director has an "Open Door Policy" which gives parents access to the LCDC Director at any time for questions, conflicts, or concerns. If the concern is not resolved, you may discuss

the concern with the director and teachers together to find a resolution. A follow up meeting will be scheduled to make sure the concern is resolved. If it is still not resolved at this point, a formal grievance may be submitted to the Exchange Operations Manager for review. After review, a final recommendation will be made and the Exchange Council and Office of Human Capital Management will be informed. Every effort is made to provide a respectful and professional environment. The expectation is to respect everyone and support each other in maintaining the NAEYC Code of Ethics.

### Termination of Services

Except in the case of an emergency, it is expected that parents will notify the Center in writing at least two weeks in advance of withdrawing from the program. If this advance notice has not been given, tuition for the two week notification period will still be due.

Service may be terminated when a pattern of any of the following becomes excessive:

- Habitual late pick-ups
- Requests for special accommodations that Center staff cannot meet
- Failure to pay tuition in a timely manner
- Failure to comply with Center policies concerning ill children
- Being unreachable and out of touch by phone
- Failure to provide documentation requested by Center staff and/or required by DSS regulations
- Failure to keep immunization records current
- Failure to provide emergency contact updates
- Extreme behavior that prevents the child from participating safely with peers

Our philosophy of terminating services reflects that found in the NAEYC Code of Ethical Conduct.

### STAFF ACKNOWLEDGMENT FORM

I acknowledge that I have received a copy of LCDC's Operating Policies Manual, and reviewed it on the date indicated below. I understand that it is my responsibility to read and comply with the contents and provisions of this Manual, as well as any revisions or modifications made to it.

Furthermore, I understand that I should consult my supervisor regarding any questions not answered in the Manual.

I further understand that if I violate a policy set forth in LCDC's Operating Policies Manual, LCDC reserves the right to take appropriate disciplinary action against me, including and up to involuntary termination for the first violation.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

### PARENTAL ACKNOWLEDGMENT FORM

I acknowledge that I have read a copy of LCDC's Operating Policies Manual, and reviewed it on the date indicated below. I understand that it is my responsibility to read and comply with the contents and provisions of this Manual, as well as any revisions or modifications made to it. Furthermore, I understand that I should consult the LCDC Director regarding any questions not answered in the Manual.

I further understand that if I violate a policy set forth in LCDC's Operating Policies Manual, including, but not limited to the Code of Conduct set forth in the section entitled "Parental Responsibilities and Requirements," LCDC reserves the right to take appropriate action against me, including and up to temporary suspension of my family's privilege to use LCDC, permanent removal of my child(ren) from LCDC or a bar upon my access to LCDC premises.

---

Mother/Guardian's Printed Name

---

Father/Guardian's Printed Name

---

Mother/Guardian's Signature

---

Father/Guardian's Signature

*THANK YOU*